

BUSINESS REPORT

**MONTANA SENATE
61st LEGISLATURE - REGULAR SESSION**

SENATE PUBLIC HEALTH, WELFARE AND SAFETY COMMITTEE

Date: Monday, February 23, 2009
Place: Capitol

Time: 3:00 pm
Room: 317-A

BILLS and RESOLUTIONS HEARD:

Prefix (HB, HR, HJR, SB, SR, or SJR) and number. Add Postponed (PP) when appropriate:

SB 463

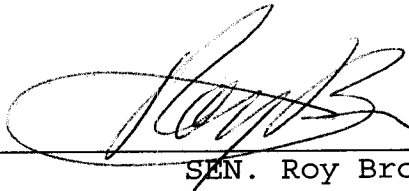
EXECUTIVE ACTION TAKEN:

Prefix (HB, HR, HJR, SB, SR, or SJR) and number. Enter P(pass) F(failed) DPAA (do pass as amended) BC(be concurred in) BCAA (be concurred in as amended):

SB 463 ^{AS AMENDED} DO PASS

SB 445 ^{AS AMENDED} DO PASS

COMMENTS:



SEN. Roy Brown, Chairman

MONTANA STATE SENATE
Roll Call
PUBLIC HEALTH, WELFARE, AND SAFETY COMMITTEE

DATE: 2-23-09

<u>NAME</u>	<u>PRESENT</u>	<u>ABSENT/ EXCUSED</u>
SENATOR ROY BROWN, CHAIRMAN	✓	
SENATOR TERRY MURPHY, VICE CHAIR		✓
SENATOR GREG HINKLE	✓	
SENATOR CAROL JUNEAU	✓	
SENATOR CLIFF LARSEN		✓
SENATOR DAVE LEWIS	✓	
SENATOR TRUDI SCHMIDT	✓	



SENATE STANDING COMMITTEE REPORT

February 23, 2009

Page 1 of 2

Mr. President:

We, your committee on **Public Health, Welfare and Safety** recommend that **Senate Bill 463** (first reading copy -- white) **do pass as amended.**

Signed: _____

Senator Roy Brown, Chair

And, that such amendments read:

1. Page 1, line 13.

Following: "on"

Insert: "labor law and"

2. Page 1, line 15.

Following: "on the"

Strike: "methods that"

Insert: "labor law requirements applicable to"

3. Page 1, lines 15 and 16.

Strike: "may" on line 15 through "law" on line 16

4. Page 1, line 21.

Following: "for"

Insert: "the"

Following: "funds"

Strike: "under this section"

Insert: "available from the department"

5. Page 1, line 23.

Following: "training"

Strike: ", "

Insert: "and has"

6. Page 1, line 24 through line 25.

Following: "materials"

Committee Vote:

Yes 7, No 0

Fiscal Note Required ____

SB0463001SC.sdr

DR

Strike: ", and" on line 24 through "guardian" on line 25

7. Page 1, line 27.

Following: "(1)"

Strike: "An"

Insert: "Contingent upon approval of the program by the federal government for purposes of receiving federal medicaid funds, the department may make payment to an"

8. Page 1, line 28.

Following: "through"

Insert: "the"

9. Page 1, line 30.

Following: "29 U.S.C. 213"

Insert: "and who"

10. Page 2, line 3.

Following: "qualified"

Insert: "medicaid"

- END -



SENATE STANDING COMMITTEE REPORT


February 23, 2009

Page 1 of 1

Mr. President:

We, your committee on **Public Health, Welfare and Safety** recommend that **Senate Bill 445** (first reading copy -- white) **do pass as amended.**

Signed: _____


Senator Roy Brown, Chair

And, that such amendments read:

1. Title, page 1, line 4.

Following: "PRACTITIONER"

Insert: "WITH A PERMIT"

2. Page 2, following line 3.

Insert: "(3) For purposes of this section, a medical practitioner dispensing a prescription pursuant to subsection (2) (d) (ii) shall apply to the board of medical examiners for a written permit to dispense prescription drugs except that a written permit is not required in order to dispense drug samples. If a medical practitioner violates the provisions of this section governing the dispensing of prescription drugs, the medical practitioner's dispensing permit must be revoked and the medical practitioner is subject to disciplinary actions by the board of medical examiners.

(4) The dispensing of drugs pursuant to subsection (2) does not allow a medical practitioner to dispense any narcotic drugs as defined in 50-32-101.

(5) For purposes of this section, "employer-based onsite clinic" means a health care facility, as defined in 50-16-504, that is sponsored by an employer for the benefit of its employees and their dependents."

- END -

Committee Vote:

Yes 7, No 0

Fiscal Note Required ____

SB0445001SC.sdr

sk

**AUTHORIZED
SENATE COMMITTEE PROXY**

I request to be excused from _____ Committee
because of other commitments. I desire to leave my proxy vote with:

Indicate Bill number and your vote Aye or No. If there are amendments, list them by name and number under the bill and indicate a separate vote for each amendment.

[illegible][illegible]

Sen. Greg Able
(Signature)

Date 2-23-09

**AUTHORIZED
SENATE COMMITTEE PROXY**

I request to be excused from Public Health committee
because of other commitments. I desire to leave my proxy vote with:

Sen. Schmidt

Indicate Bill number and your vote Aye or No. If there are amendments, list them by name and number under the bill and indicate a separate vote for each amendment.

BILL/AMENDMENT

AYE

NO

SB 445	X	
Amendment 44/501.Aj	X	

BILL/AMENDMENT

AYE

NO

Sen.

W. Schmidt

(Signature)

Date

2/23/07

**AUTHORIZED
SENATE COMMITTEE PROXY**

I request to be excused from Public Health Committee
because of other commitments. I desire to leave my proxy vote with:

Indicate Bill number and your vote Aye or No. If there are amendments,
list them by name and number under the bill and indicate a separate vote
for each amendment.

BILL/AMENDMENT

AYE NO

SB 463 Amend	X	
SB 445	X	

BILL/AMENDMENT

AYE NO

sen. Terry Murphy
(Signature)

Date 2.23.09

MONTANA STATE SENATE
Visitors Register

Public Health, Welfare, and Safety Committee

Date 2-23-09

Bill No. SB 463 Sponsor(s) Wangenried

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PLEASE PRINT

PLEASE PRINT

Name and Address	Representing	Support	Oppose	Inf.
<i>Sylvia Danforth</i>	<i>DEAP</i>	<input checked="" type="checkbox"/>		
<i>Charlie Cote</i>	<i>CDC (parent)</i>	<input checked="" type="checkbox"/>		
<i>Lisa Jones-Park</i>	<i>CDC</i>	<input checked="" type="checkbox"/>		
<i>James Bender</i>	<i>CDC</i>	<input checked="" type="checkbox"/>		
<i>Laurie Frank</i>	<i>QLC</i>	<input checked="" type="checkbox"/>		
<i>Jim DW</i>	<i>ad children services</i>			
<i>Chris Voluntary</i>	<i>CDC</i>	<input checked="" type="checkbox"/>		
MARK CADWALLADER	<i>Dept. of labor & Indus</i>			<input checked="" type="checkbox"/>
<i>Ann Brody</i>	<i>Gov's office</i>			<input checked="" type="checkbox"/>
<i>Mary Walton</i>	<i>DPHHS</i>			<input checked="" type="checkbox"/>
<i>Jeff Sturm</i>	<i>DPHHS</i>			<input checked="" type="checkbox"/>

Please leave prepared testimony with Secretary. Witness Statement forms are available if you care to submit written testimony.